PART B - FEE(S) TRANSMITTAL

	his form, together wit	h applicable f	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450			
JUN 1 6 2005	<u>g</u>		or <u>Fax</u>	(703) 746-4000		
INSTRUCTIONS: This for appropriate. All further co- indicated unless corrected maintenance fee notification	In should be used for transfer respondence including the below or directed otherwise as.	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBL ders and notification of specifying a new	ICATION FEE (if required in of maintenance fees correspondence address	sired). Blocks I through 5 s will be mailed to the current ; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CRIPTED ONDENCE ADDRESS (Note: Use Block 1 for any change of address) 25006 7590 04/11/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
GIFFORD, KRASS, GROH, SPRINKLE & CITKOWSKI, P.C PO BOX 7021 TROY, MI 48007-7021				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
06/17/2005 FFANAIA3 00000085 09540461				Sheryl L. Hammer (Depositor's name)		
01 FC:2501 02 FC:8001	700.0 30.0			Anyl Lanner (Signature)		
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/540,461	03/31/2000	Charles J. Cohe		en	CYB-05902/03	2113
TITLE OF INVENTION: B	EHAVIOR RECOGNITION	I SYSTEM				
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE I	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0	\$700	07/11/2005
EXAMINER ART UN			IIT (CLASS-SUBCLASS	J	
VU, THANH T 2174				715-863000		
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat	e address or indication of "Follence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Glifford, Krass, Groh Sprinkle, Anderson & Citkowski, PC 2 3			
		elow, no assignee of this form is NO	data will appear on T a substitute for fili	•• /	nee is identified below, the o	locument has been filed for
Cybernet Systems Corporation Ann Arbor, Michigan						
	assignee category or catego		· ·		orporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted) Advance Order - # of Copies						120
<u> </u>			Deposit Account N	umber 07-1180	enarge the required fee(s), or (enclose an extra c	credit any overpayment, to copy of this form).
_ ` '	(from status indicated above MALL ENTITY status. See	,	h Applicant is a	no longer claiming SMA	LL ENTITY status. See 37 C	'FR 1 27(g)(2)
• •					ly paid issue fee to the application of the application of the attorney or agent; or the application of the attorney or agent; or all the attorney or agent; or all the attorney or agent; or all the attorney or agent; or agent; or all the attorney o	
Authorized Signature						
Typed or printed name	John	G. Posa		Registration	une 14, 2005 1No. 37,424	-
Alexandria, virginia 22313-	1430.			in or retain a benefit by is estimated to take 12 individual case. Any c Officer, U.S. Patent and MS TO THIS ADDRES	the public which is to file (an minutes to complete, includionments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB control	